

Reproductive Risk Session 1: Slides 1-7

Topic	Material	Advisor Text
Introduction HOPE Symbol	Slide 1	At each session, regardless of your risk factors, we will talk a bit about reproductive health messages. The symbol of HOPE is the healthy family unit. That begins with healthy reproductive practices
HOPE Definition	Slide 2	The definition of HOPE includes pregnancy health education and reproductive health outcomes. Again, dependent on healthy reproductive practices.
HOPE Centers	Slide 3	Prenatal care and reproductive health services are provided at all of the HOPE Centers. We expect that you will discuss any reproductive issues with your primary provider at those centers. In this particular component, we will discuss up-to-date information about reproductive health risk reduction. We will start by <u>briefly reviewing your reproductive anatomy</u> .
Female Reproductive Anatomy Diagram	Slide 4	First let's point out some important structures: The uterus is the largest organ pictured (point to). This is where the baby grows, and can be a serious site of reproductive tract infections. These infections may travel from the vagina (point), through the cervix (point) into the uterus. From there, they may go up into the fallopian tubes (point). When you got pregnant the egg went the opposite way. It started at the ovary (point), and traveled down the fallopian tubes (point) into the uterus. Sperm had traveled up through the vagina (point) and uterus (point) to meet your egg in the fallopian tubes. Some reproductive tract infections can leave scars in your fallopian tubes that interfere with pregnancy. Discuss and answer questions.

Reproductive Risk Session 2: Slides 1-4

Topic	Material	Advisor Text
Session 2 Objective	Slide 1	Today we will talk about how your reproductive tract anatomy can make you and your baby at risk to harm from reproductive tract infections.
Pregnancy anatomy	Slide 2	Here's a picture of a developing baby in the uterus. Notice that the bag of water protects the baby. Yet, the baby is close to many structures that are part of the routes of infection, as we discussed last week. Some infections can travel across the placenta. Some can infect structures close to the baby, such as the cervix
Reproductive Anatomy	Slide 3	Notice how close sources of infections are to each other. For instance, the vagina is close to the anus (point), and the cervix is close to the vagina (point) and the uterus is close to the cervix and vagina (point). Infections can find all of these routes to the baby or the organs important to the baby.
Infections and inflammation	Slide 4	Infections and inflammations may be related to stress, self-care practices, and intercourse: oral, anal, and vaginal. Therefore, during your pregnancy, get plenty of rest and relaxation, cleanse yourself from front to back, and have careful sexual practices.
Provider	Slide 5	Ask your provider ways to prevent and treat infections. Discuss with participant and answer questions (answers to questions without making medical recommendations are appropriate. Ask participant what they have discussed with their provider. Discuss specific pregnancy spacing or infection issues as participant brings them up).

Reproductive Risk Session 3: Slides 1-8

Topic	Material	Advisor Text
Session 3 Objective	Slide 1	As we've said in the last two sessions, Reproductive Tract Infections can be risky for you and your baby. This is important to keep in mind while you are pregnant and after you deliver.
Common Infections	Slide 2	Ask participant: What infections have you heard about? (see what their answers are, and relate to the most common infections listed). The most common infections are: viral and bacterial infections and inflammations, and other reproductive tract infections.
Bacterial Infections	Slide 3	Bacterial infections can be cured with antibiotics. The most common of these are gonorrhea, chlamydia, and group B Strep. All of these can be harmful to your baby or to the organs supporting your baby.
Bacterial Vaginosis	Slide 4	Bacterial Vaginosis is an imbalance of bacteria in the vagina resulting in inflammation. It may be caused by stress, douching or other factors that lead to more bad bacteria than good bacteria. Be sure to get plenty of rest and relaxation, do not douche, and remember to have careful sexual practices.
Viral Infections	Slide 5	Viral infections such as HIV, Herpes, and Warts have no cure, but effective treatments are available.
Signs and Treatment	Slide 6	Viral infections can be transmitted without any visible signs. Early treatment is important to prevent problems for you and your baby.
Other Reproductive Tract Infections	Slide 7	Other infections such as syphilis, yeast infections, or trichomoniasis are curable, and should be treated during pregnancy.
Talk to your provider	Slide 8	Your primary care provider is your best source of information about symptoms, prevention, and treatment associated with infections during pregnancy. Ask about what you have been tested for, and what the results are.

Reproductive Risk Session 4: Slides 1-11

Topic	Material	Advisor Text
Session 4 Objective	Slide 1	Today we want to talk a little more about viral, bacterial, and other reproductive tract infections in pregnancy
Infection symptoms and complications	Slide 2	Infections can cause vaginal discharge, odor, itching, and burning. Also, as a result of infection, you may have trouble getting pregnant in the future.
Bacterial Vaginosis	Slide 3	Bacterial vaginosis may cause premature delivery , early rupture of bag of water, and low birthweight babies. It has an unpleasant, fishy odor, and has a thin, milky-white or gray discharge.
Herpes	Slide 4	Herpes symptoms come and go. Pregnant women who notice an active outbreak of sores, blisters, or pain may pass the infection to their baby during a vaginal delivery. Mothers may have more outbreaks as pregnancy progresses. There is no odor or vaginal discharge.
Trichomoniasis	Slide 5	Trichomoniasis is a sexually transmitted disease that is a common cause of vaginal infection associated with painful and burning urination (different from urinary tract infection). It has an unpleasant odor, somewhat like spoiled food. There is a yellow-green discharge which may contain spots of blood.
Gonorrhea	Slide 6	Gonorrhea is a sexually transmitted disease that may cause premature labor and stillbirths. It can lead to infections of your other reproductive tract organs like we talked about a few weeks ago. It has no odor, and may have a yellowish vaginal discharge.
Chlamydia	Slide 7	Chlamydia often has no symptoms, but can cause bladder infections and serious infections of the reproductive tract. It has no odor and may have a yellowish discharge from the vagina. Males often have absolutely no symptoms, and assure their partners that they are uninfected.
Syphilis	Slide 8	Syphilis has several phases, and there are no symptoms associated with most of them. Untreated infections can cause stillbirth or serious birth defects. There is no odor; however, painless sores or chancres ooze an infectious liquid.
Group B Strep	Slide 9	Group B Streptococcus also seldom has symptoms—but it requires treatment in labor and delivery. If untreated, it causes serious illness in the newborn.
Other Symptoms	Slide 10	Other symptoms of infections include NONE, vaginal itching and burning, and painful urination.

Talk to your provider	Slide 11	Report all possible symptoms or possible exposure to infections to your primary care provider. Discuss with participant whether she has been treated in the past, and for what. Answer questions.
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Reproductive Risk Session 5: Slides 1-8

Topic	Material	Advisor Text
Session 5 Objective	Slide 1	Today we will talk about pregnancy and newborn risks caused by reproductive tract infections
Complications	Slide 2	Viral, bacterial and other reproductive tract infections can cause early rupture of the baby's bag of water, pregnancy loss, or newborn or infant death.
Normal Newborn vs. Premature infant	Slide 3	Normal birthweight infants weigh 5#8oz or more, while prematures weigh less than that—you want your baby to weigh at least 5#8oz. A full term pregnancy is between 37 and 40 weeks gestation. Normal birth length is from 19-21 inches, and normal head size is from 13-15 inches.
Normal Newborn	Slide 4	Here is a picture of a typical normal newborn infant.
Premature infant	Slide 5	Compare it to prematures who are born too early, and who have lower birthweight, shorter length, and a smaller head size.
Health Risks	Slide 6	Other conditions that affect the reproductive tract are infections of the pelvic organs (PID), the uterine lining (endometritis), and the cervix (cervicitis), and postoperative infections after cesarean delivery.
PID	Slide 7	Pelvic Inflammatory Disease harms a woman's reproductive system and if untreated can lead to sterility and chronic pain. The symptoms include spotting between periods, and pain in the lower abdomen and back.
Treatment of Infections	Slide 8	Most infections require specific medication available only by prescription. Partners often also must be treatment. Ask your provider for specific information.

Reproductive Risk Session 6: Slides 1-4

Topic	Material	Advisor Text
Session 6 Objective	Slide 1	As you remember, at the close of each session, we discuss reproductive health issues. We've talked a lot about reproductive tract infections. The other reproductive health issue we want to talk about today is pregnancy spacing (language is deliberate, but you may need to clarify by relating to terms such as birth control or family planning).
Ideal Pregnancy Spacing	Slide 2	Ideal pregnancy spacing is two years between births. This period of time can be used to spend time with your baby, to promote good infant development, and this will also give your body time to recuperate and build up your physical health.
Reasons for pregnancy spacing	Slide 3	Pregnancy spacing reduces the risk of low birth weight and preterm labor for your next baby. It also allows you to build up physical and nutritional reserves. It provides you time to enhance and promote your baby's emotional, mental, and physical development.
Provider	Slide 4	Talk with your provider about the importance of pregnancy spacing, and get their advice about ways you might consider spacing your children.

Reproductive Risk Session 7: Slides 1-5

Topic	Material	Advisor Text
Session 7 Objective	Slide 1	Understanding the menstrual cycle can help you better understand yourself and your fertility
Menstrual cycle	Slide 2	The first day of your cycle is the first day of your period. Each cycle usually lasts 28 days, but may be longer or shorter. (Ask participant how long her cycle usually lasts). Ovulation occurs about 14 days before your cycle starts again—which may be hard to predict.
Fertile Days	Slide 3	Women who understand their menstrual cycle are sometimes interested in finding their fertile days—the days they can get pregnant.
Fertile Phase	Slide 4	The fertile phase lasts for about 9 days. 2-7 days of sperm life, plus 1-3 days of egg life. This may be longer than you thought (engage participant about her past understanding).
Calendar	Slide 5	If you were regular, these would be the typical days you could get pregnant in a 28 day cycle. Notice there are only about 7 days that you could have sex (when you were not on your period) that you would not have a possibility of getting pregnant. Some women space their pregnancies by not having sex on days that they might be fertile. You probably have talked with your provider about how you plan to space future pregnancies. Discuss plans with participant here. (It is appropriate to discuss anything that the participant brings up. Use reference materials to answer questions as appropriate).

Reproductive Risk Session 8: Slides 1-4

Topic	Material	Advisor Text
Session 8 Objective	Slide 1	Let's just go over what we have discussed about Reproductive Risk Reduction.
Reproductive Tract Infections	Slide 2	We have discussed that some infections are classified as sexually transmitted, and some are vaginal infections or due to an inflammatory process that may be related to stress or sexual practices.
Reproductive Tract Infections Review	Slide 3	Reproductive Tract Infections may present to you with symptoms such as vaginal discharge, odor, external discomfort, painful urination, or itching. It is important that they be identified and treated as soon as possible.
Pregnancy	Slide 4	Pregnancy Spacing reduces health risks for you and your next baby, is good for this baby, and for your reproductive health. Your primary care provider is your best source of pregnancy spacing information.

Reproductive Risk Postpartum Session 1: Slides 1-8

Topic	Material	Advisor Text
Postpartum 1 Objective	Slide 1	As we did during pregnancy and at each postpartum session, regardless of your risk factors, we will talk a bit about reproductive health messages. The symbol of HOPE is the healthy family unit, which as we've said before, begins with healthy reproductive practices
RTI Pregnancy Spacing	Slide 2	The definition of HOPE includes pregnancy health education and reproductive health outcomes. These are dependent on healthy reproductive practices that include avoiding reproductive tract infections when you can, or seeking early treatment, and pregnancy spacing.
Pregnancy Spacing	Slide 3	Ideal pregnancy spacing is two years between births. This period of time can be used to spend time with your baby, to promote good infant development, and this will also give your body time to recuperate and build up your physical health.
Pregnancy Spacing	Slide 4	Pregnancy Spacing reduces health risks for you and your next baby, is good for this baby, and for your reproductive health. Your primary care provider is your best source of pregnancy spacing information. Discuss with participant what plans she has made, and what she needs to do now to carry them out.
RTI	Slide 5	Reproductive tract infections can be risky for you and your baby. This was important to keep in mind while you were pregnant and now, since you have delivered, it is a good time to develop practices that will keep you healthy .
	Slide 6	We have discussed that some infections are classified as sexually transmitted, and some are vaginal infections or due to an inflammatory process that may be related to stress or sexual practices.
	Slide 7	Reproductive Tract Infections may present to you with symptoms such as vaginal discharge, odor, external discomfort, painful urination, or itching. It is important that they be identified and treated as soon as possible.
	Slide 8	Now, in the early postpartum, remember that Pregnancy Spacing reduces health risks for you and your next baby, is good for this baby, and for your reproductive health. Your primary care provider is your best source of pregnancy spacing information. Also, report all possible symptoms or possible exposure to infections to your primary care provider.

Reproductive Risk Postpartum Session 2: Slides 1-9

Topic	Material	Advisor Text
Postpartum 1 Objective	Slide 1	As we did during pregnancy and at each postpartum session, regardless of your risk factors, we will talk a bit about reproductive health messages. The symbol of HOPE is the healthy family unit, which as we've said before, begins with healthy reproductive practices
RTI Pregnancy Spacing	Slide 2	The definition of HOPE includes pregnancy health education and reproductive health outcomes. These are dependent on healthy reproductive practices that include avoiding reproductive tract infections when you can, or seeking early treatment, and pregnancy spacing. Today's goal is to be sure all your questions are answered and that you have plans in place for the future.
Pregnancy Spacing	Slide 3	To remind you, as we've said, Ideal pregnancy spacing is two years between births. This period of time can be used to spend time with your baby, to promote good infant development, and this will also give your body time to recuperate and build up your physical health.
Pregnancy Spacing	Slide 4	Pregnancy Spacing reduces health risks for you and your next baby, is good for this baby, and for your reproductive health.
Pregnancy Spacing	Slide 5	Pregnancy Spacing issues and needs may change. Your primary care provider is your best source of pregnancy spacing information. Discuss with participant what plans she has made, and what she needs to do now to carry them out.
RTI	Slide 6	Reproductive tract infections can be risky for you and your baby. This was important to keep in mind while you were pregnant and now, since you have delivered, it is a good time to develop practices that will keep you healthy for the future .
	Slide 7	We have discussed that some infections are classified as sexually transmitted, and some are vaginal infections or due to an inflammatory process that may be related to stress or sexual practices.
	Slide 8	Reproductive Tract Infections may present to you with symptoms such as vaginal discharge, odor, external discomfort, painful urination, or itching. It is important that they be identified and treated as soon as possible.
	Slide 9	